

# NOTICE OF DIRECT AWARD

STATE OFFICE OF RURAL HEALTH

SMALL HOSPITAL IMPROVEMENT PROGRAM (SHIP)

POSTING DATE: THURSDAY, SEPTEMBER 10, 2015 INQUIRY CLOSING DATE: WEDNESDAY, SEPTEMBER 16, 2015

ROMERO M. STOKES, GRANT MANAGER
GEORGIA DEPARTMENT OF COMMUNITY HEALTH
OFFICE OF PROCUREMENT AND GRANTS ADMINISTRATION
2 PEACHTREE STREET, NW, 35TH FLOOR
ATLANTA, GEORGIA 30303-3159
TEL: (404) 463-5524 E-MAIL: rstokes@dch.ga.gov

## **DIRECT AWARD JUSTIFICATION**

CRISP REGIONAL HOSPITAL, INC. - RURAL HOSPITAL STABILIZATION PILOT

### AGENCY BACKGROUND

The Georgia Department of Community Health (DCH) was created in 1999 by Senate Bill 241 and has the responsibility for insuring over two million people in the State of Georgia, maximizing the State's health care purchasing power, coordinating health planning for State agencies and proposing cost-effective solutions for reducing the number of uninsured. Within DCH, the State Office of Rural Health (SORH) serves Georgians by improving access to health care in rural and underserved areas to improve health status and reduce health disparities.

#### PROGRAM OVERVIEW

The Department of Community Health, State Office of Rural Health works to improve access to health care in rural and underserved areas and to reduce health status disparities. SORH provides funding for institutional frameworks that link small rural communities with State and Federal resources to help develop long-term solutions to rural health problems.

The primary objectives include the following:

- Empower communities to strengthen and maintain the best possible health care using existing resources;
- Provide up-to-date health systems information and technical assistance;
- Build strong partnerships to meet local and regional needs;
- Provide incentives to local areas to implement integrated service delivery systems;
- Be the single point of contact for all regional issues related to health care.

#### AWARD JUSTIFICATION

With continuing strategic focus on Value-Based Purchasing, all hospitals, including critical access, now need to increase their efforts to improve quality in the small and rural hospital environments. Because of the varying needs for technical assistance among small rural and critical access hospitals, GHAREF is providing member hospitals the option of selecting services that most appropriately meets their individual needs. Value Based Purchasing activities are labor and resource intensive programs for hospitals. The hospitals participating in the Value Based Purchasing Quality Improvement Consortium are:

- 1. Bacon County Hospital
- 2. Brooks County Hospital
- 3. Candler County Hospital
- 4. Chatuge Regional Hospital
- 5. Effingham Health System
- 6. Grady General Hospital
- 7. Higgins General Hospital
- 8. Jasper Memorial Hospital
- 9. Jeff Davis Hospital
- 10. Jefferson Hospital
- 11. Memorial Hospital and Manor
- 12. Miller County Hospital
- 13. Mitchell County
- 14. Phoebe Worth
- 15. Polk Medical Center
- 16. University Hospital McDuffie
- 17. Washington County RMC
- 18. Putnam General Hospital
- 19. SGMC Berrien
- 20. SGMC Lanier
- 21. SE Georgia Health System Camden Campus

In order to provide the most comprehensive program in a cost-effective manner, hospitals participating in the SHIP GHAREF VBP QI Consortium may select items that meet their needs from the following item list.

- 1. Up to \$7,000.00 may be used to offset the cost of various data-related services such as:
  - Cost of vendor related fees for Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) data services and transmission to Centers for Medicare and Medicaid Services (CMS) for VBP/Medicare Beneficiary Quality Improvement Project (MBQIP) requirements; requires data agreement with vendor to provide data quarterly with GHA to facilitate comparative reporting and improvement activities.
  - The GHA Hospital Industry Data Institute (HIDI) Analytic Advantage Program; a suite of data analytics and decision support products that allows hospitals to improve clinical quality and patient safety by providing them with comprehensive, integrated data delivery system with powerful analytical and benchmarking capabilities that includes readmissions, hospital acquired conditions, and the Agency for Healthcare Research and Quality (AHRQ) Patient Safety Indicators.
- 2. Up to \$2,000 may be allocated to cover the costs of education/training; onsite hospital consultation and coaching, registration fees, training materials and other technical assistance. The education/training topics include, but are not limited to; a. collection of inpatient or outpatient quality data; b. improved methods/best practice implementation; c. HCAHPS implementation/improvements; one of the following: d. Quality Boot Camp: PPS SHIP hospital or e. Quality Boot Camp: CAH focus. AND, a. four telnet credits; b. TeamSTEPPS technical assistance/supplies for up to three days of onsite hospital training; c. DNV ISO 9001 group training at GHA (DNV ISO 9001, is a certification that is particularly strong on seeking to reduce errors, both in preventing mistakes recurring and by identifying potential mistakes before they occur); d. Continuous Survey Readiness Spring and Fall Sessions; e. Lean Efficiency Group Training. The education and training will be provided in a variety of venues that include; webinars, teleconferences, in-person meetings, telnets, onsite, etc.
- 3. A minimum of one onsite visit from the Patient Safety Specialist will be provided for support and consultation. Techniques for engagement of leaders and front line staff of small and critical access hospitals will be taught and encouraged during these visits. The content of the visits will be based on individual needs of the hospitals.
- 4. Additional services available to consortium hospitals: a. National/State/Cohort level aggregate data will be made available for benchmarking efforts; b. access to technical advisors quality reporting, analysis, and improvement strategies, best practice intervention via email/phone; c. rural issues in "Safety Across the Board" shared learning collaborative; d. training on hospital inpatient quality reporting/outpatient quality reporting/MBQIP measures including data abstraction and improvement tactics.

AWARD(S)	TOTAL DIRECT AWARD FUNDS AVAILABLE: \$201,516.00
TO SUBMIT INQUIRIES TO THIS DIRECT AWARD NOTIFICATION	
Romero M. Stokes, Grant Manager at <a href="mailto:rstokes@dch.ga.gov">rstokes@dch.ga.gov</a> no later than 2:00 PM on Wednesday September 16, 2015	